

MEM – Medicare Buy-In Quality Assurance

Purpose:

This procedure explains how Medicare Buy-In is researched and processed.

Identification of Roles:

Member Services Specialist (MSS)

Member Services Specialist Lead (MSSL)

Performance Standards:

Member Services is required to answer all e-mails within 15 days and work each report by the end of the month.

Path of Business Procedure:

Step 1: The MSS will turn in their work by either giving the MSSL the report they worked or copy them on the e-mail reply they sent.

Step 2: The MSSL will follow the same steps as the MSS (See Medicare Buy-In Research Procedures) on all e-mails and 10 percent of all reports.

Step 3: MSSL will take note of any discrepancies and discuss them with MSS (See Medicare Buy-In Reference Manual)

Step 4: MSS will make any corrections needed and report back to MSSL by having an in person discussion.

Step 5: MSSL will check the corrections to be sure they are completed while MSS is in their office to be sure no additional instruction is needed.

Step 6: MSSL will note any errors in a quality assurance data base. (See Medicare Buy-In Reference Manual)

Forms/Reports:

Invalid TXIX Claim Number Format

Title XIX Discrepancies

Duplicate Claim Numbers

Pending Accretions/Deletions Over Six Months Old

Pending Over 2 Months Old

Buy In Records with Status 21 and 24

Activity Listing for Billing Period June 2010

Billing vs Buy In Discrepancy Listing

Claim Number Exceptions

Duplicate State ID

Title XIX Monthly Buy In Update Exception Listing

MMA/Medicare Medicaid Age 65 or Older without Medicare

RFP References:

6.5.1 Managed Health Care Enrollment Broker

Interfaces:

DHS System: SSNI, EDBD, MMCR, SSBI, VIEW

Attachments:

None